

Residency Form for Tax Agreement**Little Traverse Bay Bands of Odawa Indians**

Last Name _____ First Name _____ MI _____ Date of Birth _____

Last 4 digits of your
Phone: _____ Social Security Number: _____ Tribal ID# _____Physical Home Address (**No PO Box #'s**) _____City _____ State _____ Zip Code _____ Township/
Municipality _____
(Listed on Voter Registration Card)Mailing Address (**if different than physical address**) _____

City _____ State _____ Zip Code _____

Is your permanent place of residence within the LTBB Tax Agreement Area? Yes No
If yes, fill out the utility information at the bottom of the page.

Do you own a business within the Tax Agreement Area? Yes No If yes, please list:

Name of Business _____

Street Address _____

City _____ State _____ Zip _____

DBA/Fed/State EIN or FIN # _____ % of ownership _____

I hereby certify that all information is true and accurate to the best of my knowledge.

(Signature)_____
(Date)

Attach a copy of your driver's license and/or **voter's registration** and a copy of a current utility bill within one (1) month of registering (electric, water, gas, phone, satellite). Utility bills must be in the name of the Tribal Member registering. Driver's license and utility bill must have the current address listed on both documents. If a minor, a copy of your driver's license or a copy of your school record (grade report) is acceptable. All others, please contact the Department of Commerce's office at (231) 242-1584 for other acceptable documentation for proof of residence.

Theresa Keshick, Department of Commerce Assistant

Little Traverse Bay Bands of Odawa Indians

7500 Odawa Circle Harbor Springs, MI 49740

Name of Utility Provider

Account #

Telephone _____

Cell phone _____

Electricity _____

Gas _____

(Includes natural, propane, LP and fuel oil)

Satellite/Cable _____

**** This Residency Form does NOT change your address with the Enrollment Department. You must fill out an Address Verification form with the Enrollment Department first.**